



ADVANCE OF FUNDS IN LIEU OF BORROWING REPORT

City/Town/District of _____

Purpose of Issue _____

Authorization _____
(Date and article of town meeting vote and M.G.L. citation)

Grant Number _____
(If applicable)

A. Amount of Loan Authorized		\$
Computation of Limit on <u>Total</u> of Advances:		
B. Unappropriated Free Cash	\$	
C. Stabilization Fund	\$	
D. 1% of FY _____ Budget	\$	
E. Greatest of line B, C or D	\$	
F. Other Advances Outstanding	\$	
G. Remaining Limit (line E less line F)		\$
H. Amount to be Advanced - This Issue (not to exceed line G)		\$

Date of Advance _____

Treasurer

Approved:

Mayor or City Manager

Majority of Selectmen or Commissioners

Please send 1st Copy to: **Accountant or Auditor**

See IGR #92-105 for instructions and accounting procedures

Date of Repayment to General Fund: _____

Accountant / Auditor

Please send 2nd Copy to: **Division of Local Services
Public Finance Section
PO Box 9569
Boston MA 02114-9569**

(Revised: May 2016)

Supporting a Commonwealth of Communities

mass.gov/DLS
P.O. Box 9569 Boston, MA 02114-9569
(617) 626-2300